



PTO/SB/17 (11-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

Complete if Known						
Application Number						
Filing Date	DEC 28, 2001					
First Named Inventor	BENJAMIN LA BORDE					
Examiner Name						
Group Art Unit						
Attorney Docket No.						

METHOD OF PAYMENT (check all that ap	ply)	FEE CALCULATION (continued)						
Check Credit card Money Other	None	3. ADDITIONAL FEES						
Deposit Account:			Large Entity Small Entity					
Deposit Account:		Fee	Fee	Fee	Fee	Fee Description	Fee Paid	
Account		Cod	,	Cod	,	(
Number Deposit		105	130	205	65	Surcharge - late filing fee or oath		
Account Name		127	50	227	25	Surcharge - late provisional filing fee or cover sheet		
The Commissioner is authorized to: (check all that apply)		139	130	139	130	Non-English specification		
Charge fee(s) indicated below Credit any over	' '	147	2,520	147	2,520	For filing a request for ex parte reexamination		
Charge any additional fee(s) during the pendency of this	• •	112	920*		920*	Requesting publication of SIR prior to		
Charge fee(s) indicated below, except for the filing fee	•					Examiner action		
to the above identified deposit account. FEE CALCULATION		113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action		
1. BASIC FILING FEE		115	110	215	55	Extension for reply within first month		
Large Entity Small Entity		116	400	216	200	Extension for reply within second month		
Fee Fee Fee Fee Description	ee Paid	117	920	217	460	Extension for reply within third month		
5000 (0)		118	1,440	218	720	Extension for reply within fourth month		
106 330 206 165 Design filing fee	370	128	1,960	228	980	Extension for reply within fifth month	<u> </u>	
107 510 207 255 Plant filing fee		119	320	219	160	Notice of Appeal		
108 740 208 370 Reissue filing fee		120	320	220	160	Filing a brief in support of an appeal		
114 160 214 80 Provisional filing fee		121	280	221	140	Request for oral hearing		
011070741 (4) (0) 3	7_	138	1,510	138	1,510	Petition to institute a public use proceeding	L	
	70	140	110	240	55	Petition to revive - unavoidable		
2. EXTRA CLAIM FEES FOR UTILITY AND F	REISSUE	141	1,280	241	640	Petition to revive - unintentional		
Extra Claims below	Fee Paid	142	1,280	242	640	Utility issue fee (or reissue)		
Total Claims 13 -20** = C X =	<u> </u>	143	460	243	230	Design issue fee		
Claims -3		144	620	244	310	Plant issue fee		
Multiple Dependent		122	130	122	130	Petitions to the Commissioner	·	
Laura Fatti di a umani		123	50	123	50	Processing fee under 37 CFR 1.17(q)		
Large Entity Small Entity Fee Fee Fee Fee Description		126	180	126	180	Submission of Information Disclosure Stmt		
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20		581	40	581	40	Recording each patent assignment per property (times number of properties)		
102 84 202 42 Independent claims in exce	ess of 3	146	740	246	370	Filing a submission after final rejection	[]	
104 280 204 140 Multiple dependent claim,					-	(37 CFR § 1.129(a))		
109 84 209 42 ** Reissue independent clare		149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))		
110 18 210 9 ** Reissue claims in exces	ss of 20	179	740	279	370	Request for Continued Examination (RCE)		
and over original patent		169	900	169	900	Request for expedited examination of a design application		
SUBTOTAL (2) (\$)			Other fee (specify)					
**or number previously paid, if greater; For Reissues, se	e above	*Red	luced by	y Bas	ic Filing	Fee Paid SUBTOTAL (3)	0	

SUBMITTED BY Complete (if applicable)						
Name (Print/Type)	BENJAMIN LA BORDE (Attorney/Agent)	Telephone	3103339135			
Signature	Benjamin La Borde	Date	DEC 28,2001			

WARNING Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO 2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE FEE RECORD SHEET

01/10/2002 WABDELR1 00000027 10036893

01 FC:201

370.00 OP



PTO/SB/05 (03-01)

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UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No. First Inventor

BENJAMIN LA BORD

BUPERCONDUCTING ACTION MOT

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Express Mail Label No.

APPLICA	TION ELEMENTS	Assistant Commissioner for Patents			
	-	ADDRESS TO: Box Patent Application			
	cerning utility patent application contents. orm (e.g., PTO/SB/17)	Washington, DC 20231 7. CD-ROM or CD-R in duplicate, large table or			
	duplicate for fee processing)	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)			
2. Applicant claims s See 37 CFR 1.27	small entity status.	Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)			
3. Specification (preferred arrangement)	[Total Pages 27]	a. Computer Readable Form (CRF)			
- Descriptive title	of the invention	b. Specification Sequence Listing on:			
	e to Related Applications arding Fed sponsored R & D	i. CD-ROM or CD-R (2 copies); or			
- Reference to se	equence listing, a table,	i i. 🔲 paper			
or a computer p - Background of	orogram listing appendix the Invention	c. Statements verifying identity of above copies			
- Brief Summary - Brief Description	of the Invention on of the Drawings <i>(if filed</i>)	ACCOMPANYING APPLICATION PARTS			
- Detailed Descr		Assignment Papers (cover sheet & document(s))			
- Claim(s) - Abstract of the	Disclosure	10. 37 CFR 3.73(b) Statement Power of Attorney			
4. Drawing(s) (35 U	J.S.C. 113) [Total Sheets 44]	11. English Translation Document (if applicable)			
5. Oath or Declaration	[Total Pages 2]	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations			
a. Newly exec	uted (original or copy)	13. Preliminary Amendment			
Copy from a	a prior application (37 CFR 1.63 (d)) ation/divisional with Box 18 completed)	14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)			
	TION OF INVENTOR(S) atement attached deleting inventor(s)	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)			
named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/ or its equivalent.					
6. Application Data	Sheet. See 37 CFR 1.76	17. Other:			
		the requisite information below and in a preliminary amendment,			
or in an Application Data Sh					
	Continuation Divisional Continuation-in-part (CIP) of prior application No.:/				
Prior application information:	Examiner	Group Art Unit: rior application, from which an oath or declaration is supplied under			
Box 5b, is considered a part o	f the disclosure of the accompanying continuation	on or divisional application and is hereby incorporated by reference.			
The incorporation can only be	relied upon when a portion has been inadverten 19. CORRESPONDENCE				
	13. OURILOI ONDER				
Customer Number or Bar C	ode Label (Insert Customer No. or Atlach bar.co	or V Correspondence address below			
Name	BENJAMIN	la bordé			
Address	6810 LOS VERDES	DRIVE #4			
City	RANCHO PALOS VERDES S	tate CA Zip Code 90275			
Country	USA Teleph	none 3103339135 Fax 333 6897			
Name (Print/Type)	BENJAMIN LA BORDE	Registration No. (Attorney/Agent)			
Signature	Beniaun Labor	Date Dec28,2001)			

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Check Credit card Money Other None	3. ADDITIONAL FEES					
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114 160 214 80 Provisional filing fee	121	280	221	140	Request for oral hearing	
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	140	110	240	55	Petition to revive - unavoidable	
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and over original patent	169	900	169	900	Request for expedited examination of a design application	
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**or number previously paid, if greater; For Reissues, see above	*Redu	iced by	y Basi	c Filing	Fee Paid SUBTOTAL (3)	0

SUBMITTED BY	Complete (if applicable)		
Name (Print/Type)	BENJAMIN LABORDE (Attorney/Agent)	Telephone	310 333 9135
Signature	BenjaminLaBorde	Date	DEC 28,20001

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